

THE

# MEDICAL AND SURGICAL REPORTER.

No. 883.]

PHILADELPHIA, JAN. 31, 1874.

[VOL. XXX.—No. 5.]

## ORIGINAL DEPARTMENT.

### LECTURE.

#### NEW DUTIES OF THE PHYSICIAN.

Being a Lecture delivered in Lyon, August 27, 1873, before the Section of Medicine of the French Association for the Advancement of the Sciences, by Dr. SEGUIN, as Delegate of the American Medical Association.

MR. PRESIDENT AND GENTLEMEN:—We have so many duties that it is difficult to bind us to more. But really, those which I qualify as such have nothing new but their urgency, which is due to the present circumstances.

One of these duties is for us not to work isolated, when all the other labors are undergoing coördination. To that effect we must be ready to give more uniformity and precision to our means of registering observations, so that all of them could be compared, and their conclusions easily found out. The same want the people at large experience, of a unity of money and measures, we experience for our means of observations. For we are no better off than those who incessantly try to find out the equivalence of the francs, the sovereigns, the thalers, and the dollars; with this difference, that the people are not free, and we are, to dispel those remnants of barbarism.

The clinic tables differ, not only from one nation to another, but from one hospital to another in the same city; and family physicians have neither uniform clinic tables, nor even hand-books which could be compared. Who does not feel the advantage of

substituting the unity of plan for this anarchy?

A second duty appears to be to harmonize also our means and instruments of observation. Every one has his own. One set ride the microscope, another the sphygmograph; and these later instruments have not always the unity of movement which insures the similarity of the curves in similar cases; whilst the thermometers are yet scarce, their scales vary, and the observations taken in London, Berlin and Paris can hardly be made to harmonize; so it is with almost all our instruments of observation; whence we miss very important deductions, whose terms are in our hand, but cannot be compared.

This disorder once exposed cannot fail to be corrected. Will I dare to tell you, gentlemen, that some trials in that direction have been made in the United States? Yes, since I have the honor of occupying your attention as a delegate of the American Medical Association. To uniformly register observations, we have several schemes, of which I present to you only the two here annexed. One is a *Clinic Table*, to be used either in hospital or private practice; the other is a *Prescription and Clinic Record*, equally useful as a physician's pocket-book, or as a record of health in every family. As author of both, I know their defects, and I present them to you only to demonstrate that, to bring such works to perfection, every one of us needs the critical and inventive concurrence of all of us, and this is my present object.

In regard, more especially, to the unity of the instruments and methods of observa-

tion, feeling my own deficiency and the want of time, I will indicate only one of the accessory questions which, at the same time, will serve as an introduction to my last remarks. I mean to bring to view the necessity of choosing a human thermometer, and a system of thermometrical registration, which could equally fulfill the wants of science by their precision, and the wants of the family by their simplicity.

Many physicians may yet ignore that the same thermometer is not used by the profession at large, nor that the graphic tables representing the temperature and other signs of disease have not yet found their way into all the hospitals, and are almost unknown in civil practice. This partial failure of the most admirable means of diagnosis and prognosis is due to the difficulty of tracing the graphics, even for skillful and devoted students; and to that of making the family of the sick understand the relation of the many signs of the ordinary thermometers with the very few degrees of the scale of human vitality.

Those difficulties are not the only ones, but the main ones; and which we have tried to obviate, 1st, by the creation of the physiological thermometer; 2d, by the arrangement of tables where the movements of the temperature and of other vital signs are represented—no more by curves or delineations—but by the figures themselves of the quantities given by the instruments of observation; in other terms, by the creation of mathematical thermometry.

With this instrument and this method, the all drama of life, disease and death, is seen to run out in ten centigrade degrees, seven above and three below the point of health or *norme* fixed by Becquerel and Brechet, assisted by Julius Seguin; and it would be difficult to find a person so devoid of common sense as not to comprehend, on that physiological scale, when there is danger, and when to call for medical assistance; at the same time the figures thus obtained, almost by anybody, would enable the practitioner to arrive at the most positive calculations upon the quantities of *ustion* compatible, and those incompatible, with the continuation of life.

But I must not forget that clinical thermometry is only an illustration of my second proposition, and an introduction to the last; of which presently.

Of all our duties, gentlemen, one of the

oldest and most sacred is to instruct the families who trust us in all which it is good for their race they should know of our art. In ordinary times, crowded with business, we likely let this duty slumber. But let us come to one of those epochs in which spreads some sort of epidemic of the mind, subtle, contagious, fatal; then the old and almost forgotten office of instructing our clients in all they can comprehend of the phenomena of disease and cure reappears to our consciences, a new and imperious duty.

This happens quite often. Hippocrates had to fight the theurgic doctors, and thunder them down with this aphorism: "The diseases and the cures are alone divine which conform to the laws of nature."

Herophilus and Erasistratus had brought anatomy and experimental physiology to their acme—without possible drawback to ignorance—so thought the learned of those days, like those of ours; when Origenes declared famine, sterility, corruption of the atmosphere, epidemics, etc., caused by demons. As a sequel to this doctrine, the bishops emulated the pagan magicians in performing the most astonishing cures; St. Antoine stopped the fits, St. Ida calmed the distresses of the womb, St. Come and Damien cured all and any disease, with the authorization of the Emperor Justinianus; then the therapeutes cured by the spirits, *Æons*, or Demons.

Then began that long night which invaded the civilized world; often starting from the nursery and the sick-chamber, under the pretence of instructing and curing the women and the children, they destroyed the harmonious cranium, produce of Grecian culture, and substituted in its stead—either pointed like the Peruvians, or flattened like the Mexicans—those heads which are seen yet upon the monuments, singing their idiotic alleluias.

Could it be true that we are threatened with a recurrence of this leprosy of the mind? \* \* \* \* The answer depends to a great extent upon what we physicians shall do to prevent the affirmative, and this, gentlemen, is the great duty which the present condition of human society devolves upon us, more than upon any other class of men, and which we shall fulfill.

I support my hope upon the opinions of the men I have recently conversed with; M.M. Wunderlich, Brown-Sequard, Lorrain, Littré; to which your memory will add the

printed authority of Aitkin, Sydney-Ringer, Jaccoud, etc. Moreover, the practice has demonstrated to all of us that, as soon as a mother is instructed in the simple art of taking the temperature of her patients, and thereby to follow the natural march of disease, and the rational effects of medication, she and her family are proof against the epidemic of cures by the devils or by the saints.

Besides thermometry, we have many other means of instructing the people upon their natural conditions. But those means, too, need coördination; a task worthy of your society for the advancement of sciences, and in which you can do a great deal of good in a few years.

Therefore, and with this conviction, I stop, after having hardly delineated the plan of the work the accomplishment of which I beg you to entrust to a special commission; and beg you to form said commission with power to add to itself foreign members, and with the duty of reporting progress at your next meeting, on

1. The best means of coördinating and generalizing medical observation.

2. On the choice of the best instruments and methods of physical and positive observation, in view of generalizing their employment.

3. The best methods of demonstrating to mothers and to all who have charge of infants and sick people, that diseases are natural phenomena; and that whoever pretends to supernatural powers which can give and cure diseases, insults the only God which, like Socrates, Hippocrates did already identify with the laws of nature, in his devotion for truth, goodness, and justice.

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The proposition of Dr. E. Seguin was strongly supported by Prof. Marey and Verneuil, the latter President of the Section of Medicine, and a commission will be constituted. Any one conversant with the persistent efforts made throughout Europe to lower once more the human intellect, will comprehend the high character of the task here assigned to the medical profession at large, and assist in carrying out this proposition, remembering that, if it has received the assent of the highest authorities in the congress of Lyon, it was originated within the American Medical Association, and grafted in Europe by one of its delegates.

## COMMUNICATIONS.

DR. JAMES McNAUGHTON.



THE OLDEST MEDICAL LECTURER IN ACTIVE SERVICE.

But few physicians pass the milestone of half a century in active life. As a rule they are retired from the field before this time, or occupy some place subordinate to a younger man. In the language of an old sea captain "they are either laid up in the harbor of debility, or stranded on the quicksands of disease." These times of fast work and faster living seldom permit men of any occupation to cross the fiftieth anniversary of their business career still bearing the heat and burden of the day. In the history of the medical profession only a few instances are on record, of physicians who have lectured and taught the science through the changes of half a century. To have lectured all these many years, and be still at the desk, instructing the second and third generation of former pupils, is a peculiar honor rarely given. Dr. James McNaughton, President of the Albany Medical College (now the medical department of the Union University), and the professor of theory and practice, is the oldest lecturer (in all probability) in the world. He was born in Scotland, in 1796; his father was a wealthy farmer on the Grampian hills in Perthshire. His boyhood was spent on these romantic mountains; and here a vigorous constitution was built up, which

has enabled him to outstrip his cotemporaries in labor and long life. Preparing for college at Kenmore, Dr. McNaughton was admitted to the University of Edinburgh; in 1812. Entering the medical department he graduated in 1826, intending to enter the navy. The war closing at this time, he gave up the idea, and continued his studies another year under the celebrated Profs. Gregory and Hamilton, both leading lecturers at the University. Securing an engagement as surgeon on an emigrant ship to this country, he landed at Quebec in July, 1817. While the ship was waiting he paid a visit to some distant relatives in Albany, who persuaded him to resign his position and commence to practice here. Following their advice he soon took a prominent position in the profession, and three years after was appointed to deliver a course of lectures on anatomy at the then popular College of Physicians and Surgeons, at Fairfield, N. Y. The next year he was appointed full professor of anatomy and physiology, and continued to lecture for nineteen years. One year he filled the chair of surgery, making in all twenty years at this college. In 1840 the Albany Medical College was organized, and Dr. McNaughton was made professor of the theory and practice of medicine, which chair he has held with great acceptance up to the present time. He is now delivering his fifty-third annual course of lectures, and during this more than half century, he has not missed a dozen lectures, or been confined to the house a week with illness. Dr. McNaughton has also been a busy, successful practitioner. Of late years he has been constantly occupied as a consulting physician, with a particular reputation for excellent judgment and careful diagnosis. As a lecturer he is clear and concise, abounding in forcible illustrations drawn from his long experience. To medical literature, in reviews and journals, the doctor has contributed numerous papers, which have been noted for their accuracy and painstaking statements, as well as their practical originality. Through all the vast revolutions in the practice of medicine, from 1812 down to the present time (comprising an era in the history of medicine of more importance than that of centuries before), Dr. McNaughton has been conservative; following along in the line of the great changes, adopting new theories only when they have been established by experience.

This course has given him a wide reputation as a careful, reliable expounder of the science. In appearance the doctor is a tall, well built, hale-looking old man, very courteous and genial in his manners. His mind is clear and strong, and his lectures are delivered with all the energy and freshness of early life. He is now 77 years old, and has lectured fifty-three years; giving frequently two courses of lectures in one year. In all he has given about seventy different courses of lectures. His health is good, and he bids fair to keep the field for many years. All his early cotemporaries are gone. In the lecture field Prof. Christison, of the University of Edinburgh, is the next oldest man at work; he began to lecture in 1838. No other of the faculty of the college at Fairfield is yet living. Dr. J. H. Armsby is the only one who began with him thirty years ago and more, in the Albany Medical College, and is still at his post. C.

#### SOME PRACTICAL HINTS FOR THE TREATMENT, AND FOR THE PREVENTION OF UTE- RINE DISORDERS.

BY WILLIAM GOODELL, M. D.

Physician in Charge of the Preston Retreat;  
Clinical Lecturer on the Diseases of Women and  
Children, in the University of Pennsylvania, etc.

(Continued from No. 882.)

*Fibroid Tumors of the Womb.*—The treatment of this class of growths may be divided into the *palliative* and the *radical*. The former aims to accomplish the following ends: 1. To stay the hemorrhage; 2. To allay uterine colic and pelvic pains; 3. To lessen the inconveniences arising from the weight and bulk of these tumors; 4. To check their growth.

To stay the hemorrhage is the most imperative of all the indications in the treatment of these growths, and as such I shall dwell on it at some length. For this purpose, a day or two before the one on which the menses are expected, relieve the precursory engorgement of the pelvic viscera, by a saline cathartic, and put your patient to bed, where she is to stay during her sickness. Such rest, and I mean functional rest as well as physical rest, will alone often act like a charm. If it fails, give a teaspoonful



of the fluid extract of ergot every two, three, or four hours, according to the urgency of the symptoms. In the long run ergot is, here, our sheet anchor. Next to ergot ranks gallic acid, given in doses of from twenty to thirty grains, repeated every two, three, or four hours. I know nothing better to check the most alarming hemorrhages, either from the womb, as in menorrhagia, or from the bowels, as in typhoid fever. When serious emergencies of this kind arise, to give smaller doses is mere trifling. Any table syrup will disguise its taste and reduce its bulk. Sometimes one will succeed best by combining ergot with gallic acid, to which must often be added morphia enough to allay the severe pelvic and uterine pains. Quite recently Spencer Wells and others have highly lauded a free exhibition of an infusion of *Vinca major*, the greater periwinkle of our flower gardens, in the proportion of two ounces to twenty of boiling water. I have no experience with it; but such recommendations make it worthy of trial. I have seen an old woman's remedy of cinnamon boiled in milk act like a charm, when other medicine failed. Leeching or scarifying the cervix a day or two before the menstrual flux will relieve the local congestion and very materially lessen the bleeding.

During the intervals between the hemorrhages iron in some form is indicated; not given alone, but in combination with such medicines as lessen the congestion of the womb. For this object ergot and the Indian hemp sustain the greatest reputation. *Digitalis* and arsenic have many advocates, and so has *Ipecacuanha*. All these remedies must be given in doses as large as can well be borne. A favorite mixture of my own, which, by the way, I often give in every kind of uterine engorgement, is—

R. Tinct. ferridi chloridi  
Acid. phosphorici dil.  
Ext. ergotæ fluid. aa.  $\text{ss}$ .  
Aque cinnamomi fl.  $\frac{3}{4}$  v. M.

Sig.—One dessertspoonful after each meal, in a wineglassful of water.

If, by these means, the hemorrhage is not checked, then inject subcutaneously a hypodermic syringe of the fluid extract of ergot, or an equivalent dose of a concentrated infusion of the powdered ergot. Should there be no response, then the physician may proceed in the usual way to tampon

the vagina. He will, however, find it a far better practice to plug up the canal of the cervix; for not only will he thus least inconvenience the woman, and also more effectually control the existing hemorrhage, but, further, he will lessen the tendency to future ones. For this purpose squeeze into the os the largest sponge-tent possible. Or else, expose the cervix by a speculum, hook down the anterior lip, and then, with a sound, pack, little by little, into the os and cervical canal all that is possible of a long and narrow strip of lint. First dip the lint into a saturated solution of Monsel's salt, and also, for convenience of removal, leave a short tail outside of the os. Of these two methods, I much prefer the former; because, since some blood will always ooze out by the side of the sponge and through its substance, it can be kept in for two or three days without becoming fetid; and because it is a fact that whatever dilates the cervical canal of a womb containing a fibroid tends to lessen the frequency and duration of the hemorrhagic attacks. Repeatedly, after using a sponge-tent, either for diagnostic purposes or as a tampon, have I seen the hemorrhages much diminished for weeks and even months.

Let me advance a step further; for, to combat this most formidable of symptoms, to confront, what Homer calls, "the purple death," we must be armed at all points. A woman cannot be always kept tamponed, or for an indefinite length of time, and yet, when the tent is removed, she may bleed as badly as ever. Stretch open, now, the cervical canal by the dilator, and after introducing the slender nozzle of the uterine syringe between the open blades, inject into the uterine cavity one or two drachms of the tincture of iodine, or as much of a strong solution of Monsel's salt. Or else push up into the uterine cavity, as far as it can be made to go, a piece of lunar caustic weighing from five to ten grains, and let it dissolve there. Another way is to swab out the uterine cavity with fuming nitric acid, in the manner previously described. Any one of these plans is, for the time being, usually very efficacious. But supposing it fails; or the hemorrhage, after being arrested for a few days, returns with renewed violence. The canal of the cervix must now be so opened as to admit the index finger. This is done by incising the whole canal, either bilaterally with the hysterotome (Fig. 16), or at several

FIG. 16.



points with a probe-pointed and curved bistoury. In performing the latter operation, it is best to expose the cervix with a speculum, and to steady the anterior lip with the volsella. Whenever the cervix is thinned down to a mere rim, a strong pair of curved scissors will readily slit up the margin. In case the cervix is long and uneffaced, my own plan is to stretch the canal open by the dilator, and crowd into it a fagot of laminaria tents, before resorting to cutting instruments. My reason for this is, that, very commonly, after such a dilatation of the os, the further descent of the tumor prevents the opening from closing. The mode by which a permanent expansion of the canal controls the hemorrhagic tendency is not yet clearly understood. It is not the only empirical fact in medicine which has to be taken on trust. But experience teaches, that, after such an expansion, the hemorrhages often remain for months in abeyance.

Stripped of its power to bleed, a fibroid is shorn of much of its power to do harm; but there will remain for treatment pelvic pains, and vesical and rectal tenesmus. More commonly at the menstrual periods, but also at other times, the womb is excited to extrude the foreign body. These pelvic pains and these uterine colics will often tax one's skill and tact. Much can be gained from rest. Frequent warm baths may assuage the vesical and rectal irritation. Anodyne suppositories, either rectal or vaginal, always give much comfort. Two grains of the watery extract of opium will be enough for a rectal suppository; and one grain of morphia with two of the extract of belladonna, for a vaginal one. This method of giving anodynes is better than that by the mouth, which leads sooner or later to the habit of opium-eating.

To lessen the inconvenience arising from the weight and bulk of these tumors, various forms of pessary may be tried. But they are only available when these fibroids are small enough to move about pretty freely

in the pelvic cavity. Whenever they are too bulky to sink down very low into the pelvis, or, having been artificially pushed up, the indication is to maintain them above the brim, external support must be resorted to. An elastic broad belt, stiffened by alps of whalebone, and kept in position by a perineal strap, will then give much comfort by relieving the pelvic viscera from pressure. I have been able to send on a jaunt through Europe a patient with a very large fibroid thus supported.

To check the growth of these tumors, it will be necessary to advise total abstinence from sexual intercourse, more or less of the recumbent posture, loose dresses, a somewhat sedentary life, and a spare but wholesome diet. Such medicines must be given as are known to lessen the flow of blood to the reproductive organs. This class of remedies comprises ergot, digitalis, cannabis indica, borax, cinnamon, and the bromide or the iodide of potassium. Every means must be used to prevent portal and pelvic congestion. With this object in view, the contents of the bowels must be kept soluble, and rest strictly enjoined before, during, and after the menstrual flux. Broken down constitutions fearlessly build up by vegetable and mineral tonics; by stimulants very exceptionally. All growths thrive best in a cachectic soil. By these means, and by those previously noted, the physician will very generally succeed in tiding his patient safely over the perils of the menstrual period of her life; and, the climacteric once reached, her future will thereafter be one of comparative comfort.

So large a measure of success cannot be promised of the radical treatment of these tumors. Hitherto very many different remedies have been tried, but with such indifferent success, that it would be a waste of time to enumerate them. The most feasible and rational plan is that proposed by Prof. Hildebrandt, of Königsburg (*Half-Yearly Abstract*, January, 1873, p. 248), which bids fair to prove of great value. He reports that he has successfully treated nine cases of fibroid tumors of the womb by daily injections of the aqueous extract of ergot under the skin around the umbilicus. By this treatment one fibroid, reaching above the navel, entirely disappeared. Another, which so filled the entire abdominal cavity as to press upon the false ribs, was much reduced in volume. In the other cases the

tumors were greatly diminished in size; and in each one all the alarming symptoms, such as menorrhagia, metrorrhagia, leucorrhœa, and uterine colics, disappeared. The duration of the treatment was from two to four months, the daily injections being intermitted only during the catamenial period. In one case only did the toxic effects of the ergot compel a discontinuance of the treatment. For these injections, Prof. Hildebrandt uses an ordinary hypodermic syringe of a solution containing three parts of ergotin to 7.5 parts each of glycerine and water. The mode of action of the ergotin in these cases was, probably, its property of contracting the uterine walls, whereby the nutrition of the tumor was interfered with. It is, therefore, very questionable whether any but interstitial and submucoid tumors can be acted upon. For the subperitoneal fibroid would be outside of the grasp of the uterine fibres. From this treatment so many successful cases have been reported in the journals (See Report on Obstetrics in the *Trans. State Med. Society of Pennsylvania*, for 1873, p. 86); and I have seen such good results from it, that I can confidently recommend its adoption. Headache, severe uterine pains, and a spurious hectic fever evinced the constitutional action of the ergot in the cases of which I have cognizance. The local effects of the injections were at first great pain and redness of the skin at the seat of puncture, and an occasional small abscess. The last, however, can be generally avoided by carrying the nozzle of the syringe deeply down to the level of the muscular parietes of the abdomen. As there is no standard preparation of ergotin at all trustworthy, I should recommend from ten to fifteen minims of the official fluid extract of ergot, diluted with enough of water to fill the hypodermic syringe; or the same amount of a concentrated infusion of powdered ergot, of equivalent strength. Or else, Squibb's solution of ergot, which is double the strength of the official fluid extract, may be used. When the subcutaneous treatment cannot be borne, an enema of one, two, or three drachms of the official fluid extract, in an ounce of thin starch-water, may be given every night at bedtime. By inspissating the fluid extract by very moderate heat, large amounts can be incorporated with a rectal suppository.

Prof. Hildebrandt's method promises so large a measure of success, that it seems

hardly worth while to advert to the surgical treatment of these tumors. Yet time may show that there are interstitial and submucoid fibroids not amenable to the hypodermic treatment. Of course all pedunculated submucous 'growths' are to be treated like polypi. Before the appearance of Prof. H's article, there were reported several successful cases of enucleation of those fibroids by forcible traction with volsellæ and powerful supra-pubic expression, after the division of the capsule. But, more in accordance with nature and less rude, does a partly expectant plan seem to me, viz., after the incision into the capsule, to depend for the further extrusion of the fibroid upon the expulsive action of ergot, and upon repeated attempts with the finger at enucleation, resorting to avulsion only after the fibroid begins to project from the os, or to show other signs of commencing dislodgement.

The treatment by ergot may also in some cases so increase the peristaltic action of the uterine fibres, as to force an interstitial fibroid towards the abdominal cavity, where it becomes subperitoneal, and then loses much of its power to do harm. In this manner, also, an originally interstitial or submucous fibroid may be more and more forced into the uterine cavity, until it is converted into a fibroid polypus, which is amenable to surgical treatment. It is, however, doubtful whether an interstitial fibroid ever becomes polypoid, without first losing its muscular or mucous investment; that is to say, without the process of spontaneous enucleation. The simplest and safest method of effecting such an extrusion is to dilate the os by several incisions, and to keep up a persistent contraction of the uterine fibres by the continuous hypodermic use of ergot. If, however, there should be no disposition on the part of the fibroid to become polypoid, then may its capsule be divided. But not unless the case is an urgent one, the hemorrhage uncontrollable, the bulk-pressure unendurable.

(To be Continued.)

## STRYCHNIA AS A MEDICINE AND A POISON.

BY DR. L. G. HARLEY,  
Of Wooster, Ohio.

I have prescribed strychnia for a quarter of a century as an effective and favorite re-

medy in a great variety of cases; generally, however, in the neuroses. Perhaps my first triumph was in a case of chorea. After failing with other acknowledged remedies, I prescribed strychnia. My patient was an eight-year old little girl:—

R.—Strychniæ, gr.  $\frac{1}{10}$ ;  
Quevenne's iron,  
Sulph. quiniæ, ʒā gr.  $\frac{1}{2}$ .

For one pill.

One to be taken morning, noon and evening.

My little patient improved rapidly, and in some two weeks from taking the strychnia was dismissed, cured.

I have since prescribed this remedy in appropriate doses in a number of other cases of the same disease, with like happy results. Where other medication was necessary, as for constipation, amenorrhœa, etc., it was, of course, prescribed. In hemicrania and the various cephalalgia, it almost always gives relief, and frequently cures.

Mrs. J. E., having resided in a malarious district for several years, was attacked with a singularly periodic diarrhœa, accompanied with terribly excruciating colicky pains, lasting sometimes two or three days. These attacks would come every three weeks, almost to a day. Her menstrual evacuation was normal. Her physician, after treating her a long time unsuccessfully, prescribed laudanum as a palliative, and abandoned the case. By and by her husband purchased a farm in my neighborhood, to which they removed, and in one of her attacks I was called on to prescribe for her, when I learned her history, as already given. Aside from the attacks every three weeks, her health seemed tolerably good. I regarded this case as one of those strange manifestations of malaria which occasionally annoy us, and are difficult to cure. I prescribed:—

R.—Strychniæ, gr.  $\frac{1}{10}$ ;  
Quevenne's iron,  
Sulph. quiniæ, ʒā gr.  $\frac{1}{2}$ .

For one pill.

One to be taken morning, noon and evening.

After this patient had taken my prescription two weeks, her father took a notion to consult a uroscopist, but before she took his medicine I was advised of it, and persuaded her to continue my prescription another week, and then, if she had another bad attack she might take the "water doctor's"

medicine. She continued my treatment till the time arrived for her to have another attack, when it transpired that she was cured.

Miss H., a girl of some seventeen summers, was a case of facial paralysis. I prescribed Hall's solution, and within a month her face had assumed its normal condition. This was late in the fall, and when she recovered she had some of the medicine left. Finding this during house-cleaning the following spring, and being of an economical turn of mind, she thought she had better take the remainder than have it waste. She took the usual dose, and, its strength perhaps increased by evaporation, it threw her into a convulsion. I had an urgent call to see my patient again, but found her quite recovered, and probably somewhat wiser.

Mrs. G., an aged lady in my present location, had facial neuralgia, and was prescribed for for several months, receiving very little benefit, if any. I was called to see her, and gave her strychnia, iron and quinine, as already mentioned, and in a few days her pain had left her, and she again enjoys the luxury of health.

But strychnia has another phase—I mean its toxic influence—which should make us wary, indeed, in prescribing it; nor have we any reliable antidote.

In 1855, December 25th, I was called to see Mary —, a little girl, eleven years old, and found her in terrible convulsions, the convulsions returning every few minutes, and yet the intellect clear. These convulsions were induced at any time by a sharp noise, or by touching her. A fire was burning on an old-style hearth, and the wood being of a "snapping" kind, would throw her into convulsions at every explosion. Touching her lips with a glass, to give her drink, would bring on a fit. I was intimately and pleasantly acquainted with this family, and therefore entirely unsuspecting of willful strychnia poisoning. I regarded these convulsions as the result of nervous irritation of some kind, and prescribed morphia sulphas in quarter-grain doses. This being ineffective, in half an hour I gave her half a grain of morphia, and this dose I repeated several times, at perhaps three-quarters of an hour intervals, thinking she might as well die of morphia as convulsions, knowing, however, I had an antidote if I poisoned her with the drug. In some three hours after I adopted this treatment her skin grew moist, then bathed in a profuse



sweat, and the convulsions subsided. I saw her next day convalescent.

This little girl was a step-daughter. My friend's first wife dying, he had but recently married her mother. The child had intermitting fever, and her mother had that morning given her a dose of quinine, and left another prepared in a spoon for her to take in two hours. Her mother and step-father then went to church, leaving the little girl and his two boys at home. The boys—and they were but little fellows, though manly—thought that within fifteen minutes after she took the second dose of quinine she had fits. One of these boys got on a horse and went about four miles after their parents, while the other staid at home and did the best he could for his step-sister. This last dose was probably taken about 10 o'clock A. M., and I saw the little girl about 2 o'clock P. M. In 1856, August 20th, some eight months after the little girl had convulsions, her step-father prepared a dose of calomel for his wife, she having diarrhoea, so he told me. This calomel was to be taken after dinner, and it was so arranged that no one would be at home but the victim, the children being at school, and the husband off with a load of produce to market. But a neighbor woman called to spend the afternoon with the mother of my former little patient. Mrs. — had first taken her calomel, and was putting things to rights after dinner, when she remarked to her caller, "Why, I feel so queer; O, if I only hadn't taken that medicine — gave me," immediately going into terrible convulsions, and dying within an hour. Her husband was arrested, and after a preliminary trial was committed to jail on a charge of murder. The grand jury found a true bill, when he borrowed the sheriff's razor to shave himself, and effectually cut his throat. On this man's trial before the justice of the peace, it was found that on the Thursday preceding the Sunday on which the little girl had convulsions, he had purchased a drachm of strychnia "to kill rats with."

Strychnia may prove fatal in various ways: by wearing out the nervous system, by either suppressing respiration or the action of the heart, or its deleterious influence may be exerted on all these functions at the same time, and of course is. But the drug is rapidly eliminated from the system, and therefore, to suspend the convulsions is probable to save our patient. Hence, when

chloroform was the only remedy Dr. Dresbach had when call to see his patient, who had swallowed three grains of strychnia, it was, in all probability, the very best thing he could have had. This case of Dr. Dresbach no doubt originated the idea with Charles Read, in his "Very Hard Cash," of making Dr. Sampson chloroform Maxley.

## HOSPITAL REPORTS.

### COLLEGE OF PHYSICIANS AND SURGEONS, N. Y.—CLINIC ON DISEASES OF WOMEN.

BY PROF. T. G. THOMAS.

December 12th, 1873.

GENTLEMEN.—To-day I furnish the report of the case of ovarian tumor brought before you three weeks ago. You may recollect I withdrew some of the fluid with a hypodermic, and found it to be clear. Last Saturday, at the Woman's Hospital, I removed from this patient a tumor weighing thirty pounds, and another diseased ovary the size of a hen's egg. This smaller diseased ovary contained several cysts, one much larger than the others, and in a year or so it would have given her a deal of trouble. The method of operating was to cut down on the tumor, introduce a sound and separate any adhesions (the tumor in this case had very extensive attachments), seize the cyst, evacuate it with the hollow trocar, and remove the collapsed cyst. In this case the omentum had to be detached from the wall of the cyst after it was taken out of the abdomen. The pedicle was then secured in a clamp and a glass tube inserted into the abdominal cavity, then the wound sewed up.

This tube is of glass, about four inches long and half an inch in diameter, slightly curved. It is carried down behind the uterus, into Douglas' cul de sac, and the sutures in the abdominal wound are so applied as to tightly embrace it. In this case, before the operation the bloody serum was welling out of the wound, and we estimated that from it came eight or twelve ounces of fluid.

Within twenty-four hours the abdomen was washed out with a basin of water containing from a dessertspoonful to a tablespoonful of salt, and enough of carbolic acid to give it a slight smoky taste. The manner of proceeding is this: elevate the head of the bed so as to cause all fluids to draw towards the lower part of the abdominal cavity; then draw up the tube slightly, and into it insert a gum elastic catheter with its end cut off. Pump into this catheter, by means of a Davidson's syringe, the medicated water, and it will pour out through the glass tube. This washing out has to be done once or twice in twenty-four hours. From the time of the operation up to the present there has

been no untoward symptoms. The temperature never rising above 101.2-10° Fahr. Today the tube was removed, and I consider her now free from all danger.

In respect to the use of the drainage tube, I consider it a most important item in treatment; I have used it in the last fifteen or twenty cases, and am very well satisfied with the results. In this last case, for instance, the twelve or fifteen ounces of fluid which came away after operation might have been absorbed, but on the other hand it would have been very likely to have caused septicæmia. Every man is tempted to improve on his present method, and sometimes yielding to this is not judicious. I thought to improve on the present tube, by making perforations around the side of it. I used it in one case and found the patient, after a few days, complain of a sensation of dragging down of the intestines. I first supposed this to be either neuralgic or hysterical. However, I tried to withdraw the tube and found it retained in the abdominal cavity; by making sufficiently strong traction I got it out, and found that the omentum had got into the perforations of the tube, and formed minute herniæ; in some cases nearly strangulated. Should such a thing take place into the lower orifice now, the daily washing out would free it and keep it so.

In ovariectomy the cause of death is, as a rule, not what we should expect. I mean peritonitis. Out of forty cases only two died of peritonitis. I do not mean that there were only two deaths; I think there were thirteen or fourteen; but in only two of them was peritonitis the cause. In the rest septicæmia was the most common trouble.

#### Anteflexion.

Mrs. B., aged 34, married eight years, sterile. For the last two years has complained of constant backache and pelvic pain and dysmenorrhœa, continuing nearly through the whole of the month. This is a case that will meet you constantly in practice, and it is very important that you appreciate the true condition of affairs.

*Vaginal Examination.*—When the finger is carried up a long cervix is found projecting down into the vagina, and on passing this anteriorly the finger meets an obstruction which moves with the uterus; by pressing down through the abdominal walls with the other finger we get this mass to be about the size of the fundus of the uterus. When she is turned on her side and a speculum introduced, the sound is found to enter the tumor, showing it to be the uterus in a state of anteflexion. When this patient menstruates the usual anteflexion is increased, and for this reason the uterus is engorged with blood, and its extra weight weighs it down, giving rise to a state of chronic congestion. In this way the dysmenorrhœa is so long and so severe.

The sterility is due to another cause, and this is the conical cervix. It seems that the seminal fluid collects around the cervix

but does not enter the os. It happens that after many years, as if by accident, conception does take place; then other conceptions follow. Again, after the cervix is divided conceptions occur.

The prognosis would be that after three months of proper treatment the patient would be cured, but this must be systematic, and carried on in a hospital. The patient objects to go to the hospital, and would rather be treated here, so it follows that the prognosis will not be by any means so satisfactory, and will very likely result in what is called chronic metritis, though it is in reality a hyperplasia of the organ.

When the uterus is erect there is no trouble, but when it is flexed the circulation is interfered with, the arteries act but the veins are obstructed; it is this that will cause the hyperplasia.

*Treatment.*—By dividing the cervix the obstruction will be got over; then adapting an anteflexion pessary all trouble would be got rid of; but it would be necessary to obtain a satisfactory result, to put the patient in bed for a time. But patients that frequent clinics are not in a condition to comply with this.

#### Partial Prolapse of Uterus, with Retroversion.

Mrs. L., aged 33, married, has six children, the youngest being twenty-two months old. For the last eight months has been complaining of a great weight in the lower part of the abdomen, both in front and at the back. This has been so severe that she is nearly unable to walk. She does not have much leucorrhœa. But does have a good deal of pain about the menstrual periods.

*Vaginal Examination.*—When the finger is carried up the vagina anteriorly it meets the cervix at the distance of one phalanx from the vulva. Posteriorly we find a large tumor, the fundus of the uterus, which shows us that the organ is retroflexed. The internal measurement is three inches. The perineum is nearly gone. When at the bedside you meet a case like this don't annoy yourself and the patient by making a minute diagnosis of unimportant matters as many do. What you want, and indeed what the patient wants, is that the cause of the present symptoms be made out and relieved. She will appreciate this much more than elaborate minutiae indirectly connected with the case. Gynecology has not reached the scientific accuracy of ophthalmology as yet, and for this reason a number of different opinions may be given by an equal number of experienced gynecologists. In this case one might say that there is here hyperplasia of the organ, another endometritis, and so on, but what is of marked importance is that whatever it is it may be cured.

The origin of it, in all probability, was a puerperal endometritis, as the patient tells us she was in bed three weeks. This endometritis resulted in subinvolution, and as the perineum is gone the heavy organ falls down, and with its descent and mal-position increases its congestion. A very important



question arises; can cases of this kind be completely cured? I don't think so. I question whether this one will be entirely cured. But she may be very greatly relieved. How is this to be done? Put the uterus in its place and keep it so. Any tyro might say there could be but little doubt in those indications. The question is how is this to be done? To those who say they do not use pessaries, it is a very grave, if not an impossible matter, and the treatment of the case is fraught with much that is disagreeable both to physician and patient. But by the way I shall indicate this has not to be contended with, at all events to the same extent. The uterus is first replaced in normal position by pressing up the fundus, and then a tampon of cotton saturated with glycerine is placed in the former site of the displacement, so that the organ in this manner is kept up. This tampon is to be changed once in twenty-four hours, for a week or ten days, and the patient is to be kept in bed. At the end of this time the tampon may be removed, and a Cutter's pessary may be applied. About this time, in all probability, the patient will think herself cured, and the chances are that from a desire

to economize on medical attendance you will see her no more.

In the case before us this method of treatment will be advised, and if possible, carried out. At the present time it would be of no service to close the perineum, for were it done the perineum would not be strong enough to support the present weighty organ. At the end of three or four months, if the organ has regained its proper weight and size, the pessary may be removed and the perineum operated on.

As far as medical treatment is concerned I think I should advise the use of ergot in small doses, and this not for a week or a month, but for a year or so.

Hildebrand, a German observer, has brought the continued use of this remedy forward in the treatment of fibroids of the uterus. From his observations it appears to have a decided influence in reducing the organ to its proper size, and when fibroids exist to cause them to disappear. If ergot will reduce this enlarged uterus to its normal condition, it will do just what we want it to. There is no danger to be feared of its producing the disease that is brought on by food made from ergotized rye.

## EDITORIAL DEPARTMENT.

### PERISCOPE.

#### Domestic Remedies.

Mr. BRADY, President of the British Pharmaceutical Conference, in his opening address said:—

"We are possibly too apt to search at a distance for medicaments, to the neglect of many within easy reach of our own doors. I suppose it was always so, for did not Gerarde write thus of the virtues of the golden rod two or three centuries ago:—

"It hath in times past been had in greater estimation and regard than in these dayes; for in my remembrance I have knowne the dry herbe which came from beyond the sea sold in Bucklers Bury, in London, for halfe a crowne an ounce. But since it was found in Hampstead wood, euen as it were at our townes end, no man will give halfe a crown for an hundredweight of it; which plainly setteth forth our inconstancie and sudden mutabilitie, esteeming no longer of anything, how pretious soeuer it be, than whilst it is strange and rare. This verifieth our English prouerbe, Far fetched and deare bought is best for ladies."

Professor Christison corrected this tendency in one remarkable instance by the re-introduction of our common male fern (*Aspidium Filix-mas*), in place of the foreign

remedies for tapeworm which were so popular a few years ago, and it would be easy to point to many other indigenous plants that have more recently received the testimony of medical authority in their favor. For example, the rhizome of the bog-bean (*Menyanthes trifoliata*) has been stated to be in many respects superior to the root of its ally, the official gentian, and the dried leaves of the common raspberry (*Rubus Idæus*), used in some parts of the country in domestic practice in place of ergot, yield by no means the inert infusion that might be expected. The use of the expressed juice of the common periwinkle (*Vinca minor*) in uterine hemorrhage, of the rhizome of the couchgrass (*Triticum repens*) in irritable bladder, of the red clover (*Trifolium pratense*) in hay fever, of one of our brown seaweeds (*Fucus vesiculosus*) in obesity, of a species of bed-straw (*Galium aparine*) in some cutaneous affections, of the rhizome of the burdock (*Lappa minor*) in syphilitic eruptions, have all given results that, if not sufficient to establish the claims made for them, at least show a *prima facie* case in their favor. The last-named is but one instance out of several in which an indigenous British plant is official in the United States Pharmacopœia and not in our own. A Russian physiologist recently observed that the alcoholic extract of our common



hound's-tongue (*Cynoglossum officinale*) had all the properties of curare, and though a series of experiments made a year or two ago, in conjunction with my friend, Professor M. Foster, by no means confirmed the statement, they showed that the plant had nevertheless certain very peculiar effects on the nervous system, which further research might utilize. I name these but as examples of a large number that might be selected from our native flora.

#### Ringworm in Children.

Dr. Fox, in the *Lancet*, recommends that whenever a child is brought to the practitioner for his advice on account of the presence of what seem to be scurfy-looking places on the head, if these are small, and the general surface of the scalp is healthy, they are to be inspected for ringworm. A careful search should be made for broken-off hairs, and these or the scales, and any attached hairs, should be submitted to microscopic examination for fungus elements in them. In cases of chronic ringworm, all merely scurfy patches should be carefully examined, for a solitary piece of dead hair lodged in the follicle may explain the mischief, as it is generally loaded with fungus elements, which are rapidly sown broadcast to re-light up the old mischief if parasiticide treatment is abandoned. Such ill-developed cases of ringworm, as before observed, may be the source of infection to many a child in public institutions and schools.

The treatment of these cases consists in very carefully getting away every particle of scalliness, and fully epilating the scurfy area, and applying any simple parasiticide until the hair grows healthily again; epilation being repeated to get rid of all short, dull, and opaque-looking hairs.

Dr. Duckworth has recently called attention to the effect of chloroform in rendering diseased hairs in ringworm opaque; but it will be evident that this effect will not be marked where only two or three short hairs are present, whilst the test will be of no value where there are only diseased pieces of hair filling up the follicles and not projecting above the level of the latter.

#### The Action of Alcohol on Warm-Blooded Animals.

A paper on this subject was read by Dr. Binz, of Bonn, at the British Association for the advancement of Science, who related the details of a number of experiments performed by him, which went to show that one important effect of alcohol upon the human frame is to diminish the temperature to the extent of from three to five degrees Fahrenheit, this effect being produced by the action of the alcohol on the heart, causing more blood to circulate through the vessels of the skin, which are dilated, and thus a larger quantity of blood is cooled down. The alleged heat of the organism

from alcohol, he said, does not exist. The subjective impression is, at least partially, the consequence of an irritation of the nerves of the stomach and of the enlargement of the vessels arising in the skin. When given in small quantities, the thermometer shows no extraordinary increase or decrease of the temperature of the blood; moderate doses, which need not lead to drunkenness, show a distinct decrease of about half an hour's duration or more; and strong inebriating quantities evince a still more decided lowering, lasting several hours. The decrease after moderate doses takes place most successfully in warm-blooded animals which have not for some time previously had alcohol administered. Dr. Binz injected under the skin of rabbits or dogs about a cubic centimeter of ichor, which in a short time produced death; but not so if, with the ichor, alcohol diluted with water was administered either by the stomach or the skin. In the latter case the animal was quite lively and took kindly to its food; so that alcohol need not, he contended, be a narcotic. His experiments, he said, showed a threefold action; the diminution of the heat of the body, reduction of the putrid processes, and raising of the action of the heart. Alcohol was more than a simple stimulant; it was a strong antipyretic and an equally powerful antiseptic. It was *a priori* to be expected that alcohol would not be without its influence on the metamorphosis of tissues. An agent that, consumed in large doses, clearly lowered the combustion, must also be supposed to decrease the urea and the carbonic acid; and this was in reality the case.

#### On Hereditary Transmission.

The *Dictionnaire de Médecine et de Chirurgie* has an interesting article on this subject, by M. Voisin. He pronounces decisively against the idea that consanguineous marriages have any influence *per se* in producing idiocy, insanity, or epilepsy. From inquiries he has himself made in regard to the parentage of 1557 insane and idiotic patients in the great asylums of the Bicêtre and of the Salpêtrière, he has been unable to refer the condition of the patient in any one instance, to parental consanguinity. M. Voisin, of course, freely admits that the marriage of blood relations, in whom there is any strong tendency to disease or vice of conformation, is likely to perpetuate and intensify such condition. The evidence on this head is overwhelming, and our readers who are interested in this subject may refer to the paper by Dr. J. Ogle, published in a recent number of the *Medico-Chirurgical Review*, which is duly quoted in the excellent bibliography of this article. M. Voisin passes in review the various diseases that are known to be propagated from father or mother to child. And first of insanity. Burrows admits insanity to be hereditary in one-seventh of all cases. Esquirol found in 1875 insane patients 337 cases of heredi-



tary transmission. Parchappe found the proportion to be 12 per cent.; Guislain 25 per cent.; Griesinger, who only considers those cases to be truly hereditary in which one of the parents was insane at the time of procreation, reduces the number to 5 or 6 per cent. The close relation of extraordinary talents with defective mental organization in other members of the same family is strongly dwelt upon by M. Voisin, who mentions in illustration of the fact that he is himself acquainted with a painter of unusual ability, having two idiots and an insane boy for brothers. The other diseases he mentions are epilepsy, hysteria, catalepsy, hypochondria, chorea, idiocy and imbecility, general paralysis, cerebral apoplexy, locomotor ataxy, certain neuralgias, asthma, scrofula, tubercle, arthritis, cancer, syphilis, gout and goitre.

#### On Simple Vertigo.

In the *British Medical Journal*, Dr. T. CLIFFORD ALLBUTT cites a number of cases of this character, of which we quote two, with his remarks:—

Mr. J. B., aged 46, a healthy farmer, of temperate habits and comfortable circumstances, was sent to me by Mr. Bramley, of Halifax. This was a very bad case. The dizziness had commenced suddenly and continued, and often attacked him most severely. He often had to take a cab in the streets and go home. Like many others of these patients, he suffered from the great mental depression caused by the unfounded suspicion of drunkenness to which his gait gave rise. At one time the dizziness was so bad that he had to stay altogether in bed. He had some headache and lifting pains at the vertex. His general health and physical state were good. I did him no good, and Mr. Bramley told me some months later that he was no better, and had left him for other advisers.

Mr. R. P., a tradesman in very large business in Wakefield, has suffered from vertigo for eighteen months, which agrees in all its phenomena and conditions with that above described. He is a spare, nervous man, and belongs to a highly neurotic family, in which are both epilepsy and insanity. He has himself had severe *migraine* in past years. His age is now 35.

I could add the notes of fifteen more cases, at least, to the above. The affection, whatever it be, is very constant in its characters: it is not flushing, like the head-swimming of women who have disordered or suppressed menstruation; and it does not seem to depend upon vascular changes. I have questioned all my patients very closely as to the kind of dizziness—whether they themselves seem to spin round, or external objects to spin round them, etc. The same person, however, will give different replies, and the description of the vertigo seems to vary with its degree. When very bad, patients will say that the ground seems to rise up under their feet. I fancy the sensation

closely resembles that of alcoholic intoxication. My own impression is, that the affection is one of the cerebellum, or of the great basal ganglia near it. I cannot find any evidence of its belonging to dyspepsia, as was supposed by Trousseau, who has given the only good account of the malady which I have seen; nor is it generally relieved by anti-dyspeptic remedies. Like *migraine*, it offers very great resistance to treatment. Trousseau's plan of giving alkaline powders after meals, and bitters between meals, has answered in a few of my cases; but I have not been led to any great faith in it. The most potent remedies are two: first, complete change of scene and removal of all causes of nervous depression; and secondly, Turkish baths. The first remedy is the best. A continental tour, a moor in Scotland, a fishing hut on the Tweed, are the means for the wealthy, and will probably succeed well. Turkish baths I have also found of great value in every case for which I have been able to try them. Of drugs, strychnia is the only one which has helped me much, and it rarely fails to be of some use. Galvanism I have not tried; but I intend to test the value of the continuous current applied to the occipital and cervical regions. Happily, the affection does not seem to point to any approaching cerebral disease, which these patients often dread; and it tends to wear itself out in times which vary from a few weeks to two or three years. It not unfrequently, however, reappears after a time. Nearly all the patients who have consulted me have had leeches, blisters, etc., and brisk purges at the commencement of their illness; but all have assured me that such measures did them more harm than good.

#### A Case of Acute Phthisis.

The following narrative is given by Dr. PEYTON BLAKISTON, in the *London Medical Times and Gazette*:—

A very unpleasant occurrence once took place in consequence of a misinterpretation of the physical signs and the want of caution in the medical attendant, and I give it as a warning: I was called to see a young lady, in consultation with another physician and a general practitioner. They told me they had repeatedly examined her chest without discovering any marked signs of disease. Her face was puffy, her lips purple, and she was suffering from intense dyspnoea and constant dry, hacking cough. Her pulse was very feeble, 130. She had rapidly lost flesh, and was restless, irritable, feverish, and very weak. All that could be discovered by auscultation was here and there a slight cooing sound and a trace of very fine crepitation, but no absolute dullness of one part as compared with another, and there were no morbid cardiac sounds. I pointed out to the medical attendants that the absence of physical signs of any ordinary disease of the lungs or heart, coupled with the existence of general signs of great pulmonary derangement, clearly pointed to

the existence of some extraordinary disease, which could be none other than acute phthisis, the lungs being stuffed with innumerable unsoftened miliary tubercles and gray granulations, and that she had only a few days to live. After our consultation the brother of the patient came in, and asked me, among other questions, whether I considered his sister to be in any danger, to which I replied that I considered her to be in the greatest danger; and, turning to Dr. A., said, "That is our opinion, is it not?" Upon his replying in the affirmative, the brother turned round savagely upon him, and said, "Good heavens! Dr. A., how could you tell me only this morning that there was no danger?" The scene that followed may be better imagined than described. It was no discredit to Dr. A. that he should have failed to discover the nature of the disease, which was one of such extreme rarity that in all probability he had never seen it; but it was very incautious in him to have stated there was no danger, when the general signs indicated the existence of some serious and obscure affection.

## REVIEWS AND BOOK NOTICES.

### NOTES ON CURRENT MEDICAL LITERATURE.

—The *Vermont Medical Journal*, a bi-monthly, commenced on Jan. 1, 1874. It will contain entirely original articles in every branch of medical science. No selections from other journals are made. It will be devoted to the interests of the profession of Vermont, giving Vermont medical news.

### BOOK NOTICES.

*Half-hour Recreations in Popular Science*, No. 9. *The Stone Age, past and present.* By E. B. TYLER. *Theory of a Nervous Ether*, by Dr. Richardson, F. R. S.

*Half-hour Recreations in Natural History. Insects of the Garden*, by A. S. PACKARD, Jr. Boston: Estes & Lauriat. Price 25 cents. For sale by Claxton, Remsen & Haffelfinger, Philadelphia.

These entertaining essays should command a wide circle of readers. They are on topics of much interest, and by writers of acknowledged ability. Medical readers will naturally turn first to Dr. Richardson's exhibit of his theory of a nervous ether. It is in his usual admirable style, and his arguments are almost

convincing. It is not the first of the dreams of Van Helmont which has assumed a scientific form. That strange genius, like Swedenborg, caught half-glimpses of many truths concealed from his contemporaries.

The article by Mr. Packard is instructive and embellished with a beautifully colored lithograph of several of our familiar insect friends.

*Clinical Researches in Electro-Surgery.* By A. D. ROCKWELL, A. M., M. D., etc., and Geo. M. Beard, A. M., M. D., etc. New York: Wm. Wood & Co. 1873. 1 vol., 12mo, cloth, pp. 72.

The substance of this work has already appeared in a medical periodical (a fact, by the way, which ought to have been stated in the preface), and as it is concerned with a subject on which there is a growing interest, it was well to present the facts in the form of a volume. The authors are well known as energetic investigators in the field of electro-therapeutics, and their opinions command respect.

The two chapters into which the book is divided are taken up respectively with the application of electricity to the treatment of tumors, and of skin diseases. Numerous cases are presented, and the results speak well for the procedures of electro-surgery. The histories are given with great fairness, and no more seems claimed for the agent employed than the facts justify. Readers will find it worth their while to own the volume.

*Clinical Notes on the Electro-Cautery in Uterine Surgery.* By J. BYRNE, M. D., M. R. C. S. E., etc. New York: William Wood & Co. 1873. cloth, 8vo, pp. 68.

The operations in which Dr. BYRNE recommends the electric cautery are, in cancers of the os, in catarrhal, inflammatory and ulcerative affections of the cervical canal, for fibrous and fibroid tumors, for deep ulcerations of the os and cervix, vascular tumors, granular urethritis, lipoma, etc. The results, especially in the thirty cases of malignant disease which he reports, are such as to give a very favorable impression of the method he advocates. A full description of the instruments and apparatus he employs is presented, and also the history of a number of cases. The work merits a careful perusal.

## MEDICAL AND SURGICAL REPORTER.

PHILADELPHIA, JAN. 31, 1874.

D. G. BRINTON, M.D., Editor.

✶ Medical Societies and Clinical Reports, Notes and Observations, Foreign and Domestic Correspondence, News, etc., etc., of general medical interest, are respectfully solicited.

Articles of special importance, such especially as require original experimental research, analysis, or observation, will be liberally paid for.

✶ To insure publication, articles must be *practical, brief* as possible to do justice to the subject, and *carefully prepared*, so as to require little revision.

✶ Subscribers are requested to forward to us copies of newspapers containing reports of Medical Society meetings, or other items of special medical interest.

We particularly value the practical experience of country practitioners, many of whom possess a fund of information that rightfully belongs to the profession.

The Proprietor and Editor disclaim all responsibility for statements made over the names of correspondents.

## NOTICE TO SUBSCRIBERS.

The MEDICAL AND SURGICAL REPORTER, the HALF-YEARLY COMPENDIUM, the PHYSICIAN'S POCKET RECORD, and the other publications of this office, will continue to appear punctually and without interruption, as heretofore. Dr. D. G. BRINTON, who has had entire charge of both the business and editorial management of the office since more than a year previous to the death of Dr. S. W. BUTLER, will retain his relations to these publications, and increased efforts will be made to maintain their high character and general popularity.

Drafts, checks, etc., should henceforth be drawn to the order of D. G. BRINTON, as business manager.

Letters, whether on business or literary matters, should be addressed

THE MEDICAL AND SURGICAL REPORTER,  
115 South Seventh Street,  
Philadelphia.

## THE NEW VIEWS ABOUT MARRIAGE.

The objection has often been made to the theories of natural selection and evolution, that they do not apply to the human race. However true they may be among lower animals, notoriously among men the race is not to the swift, nor the battle to the strong, at least in most of the races and battles in which civilized men are engaged.

But a new view of selection has found its advocates. If natural selection has been the law of the past and the lower animals and races of man, *intelligent* selection is to be the guide and governor of future generations. The question at the root of this matter is a medical one, none more so, and we are glad to have a chance to approach it roundly under the favor of various discussions and statements in recent foreign journals.

If the race is to improve through intelligent selection, that selection must be exerted primarily in the choice of a spouse; not by the male alone, but by both parties to the contract of marriage. Moreover, physical unfitness discovered or developed after marriage must be provided against. This contemplates a profound alteration in the customs of social life and the laws of divorce.

All this is approached with an entire absence of English timidity on such topics, by Mr. George Darwin, in a late number of the *Contemporary Review*. We quote some passages from his essay to show the position he assumes:—

"Simultaneously with the diffusion of the belief in the truth of the doctrine of heredity, will come the recognition that it is as much a duty to transmit to the rising generation vigorous minds and bodies, as to hand down to them a firmly constituted society and government, to which latter point attention has hitherto been almost exclusively directed."

How is this to be accomplished? How does he propose to overturn the ancient traditions of love, of the sacrament of mar-

riage, of the permanence of the bond? Hear him.

"We can only make a really successful attack by compelling the production, before marriage, of a clean bill of health in the party, and ultimately in his parents and ancestors. Syphilis would have to be included, in case, as is only too likely, medical science and other preventive legislation should fail in depriving it of its hereditary character, or in confining its ravages to small limits."

"The ultimate restrictions to liberty of marriage would be; 1. Divorce on the appearance of certain diseases; 2. the passing of a medical examination for this same class of diseases; and 3. the production of an untainted pedigree. The medical examination might in some respects be modeled on that in force in Germany for military service, where a man is not ultimately rejected until he has been refused in three successive years. Could such legislation come into force, coupled with some such scheme as that proposed by Mr. Galton, not only might 'a cubit be added to our stature,' but the capacity for happiness in the world might be largely augmented, by the destruction of that most potent cause of unhappiness, ill health; several years might be added to human life, our ability for work and mental power immensely increased, and the coming race might end by becoming as much superior to ourselves in mind and body as the race-horse is superior in form to a shaggy pony." \* \* \* \* \*

This plan Mr. DARWIN does not hope to realize at once. People must be educated up to it. We foresee a wide field for usefulness for female examining physicians in medical inspection of brides, for even the most enthusiastic evolutionist would hardly care to entrust this delicate matter to his family physician. *Ce serait trop savoir.*

But Mr. DARWIN is not by any means the first in the field with these suggestions.

The "Institutes" of Manu, the great law-giver who is the Moses of the Hindoos, warn young men against marrying into ten kinds of families: the irreligious, that which has produced no male children, that in which the Veda has not been read, that which has thick hair on the body, and those subject to

hemorrhoids, to phthisis, dyspepsia, epilepsy, leprosy, or elephantiasis. As the Brahmins consider all present misfortune as a penance for sin committed in the present or in some past state of existence, so they ascribe leprosy as the penalty for one who steals clothes. This is a vestige of the idea that wearing another person's clothes might be contagious.

But modern extravagance and ancient superstition apart, there are good reasons why the wife should be given greater scope of selection than she now enjoys, if it in any way can be accomplished. What a fearful picture is that drawn by M. VOISIN in one of his latest studies on the effect of drunkenness on conception!

As the result of seventeen cases which were fully examined it would appear that wine, brandy, and absinthe exercise an almost identical influence upon the products of conception. Epilepsy, convulsions in childhood, and chronic myelitis are the possible consequences of conception during drunkenness, whatever the intoxicating agent may be.

In eighteen cases of conception during chronic alcoholism, without drunkenness, observed, there were born eight idiots and ten epileptics.

Of the eight idiots, four were the issue of fathers who indulged in wine, two of brandy drinkers, and two had mothers who drank brandy.

Of the ten epileptic children, five had fathers who drank brandy and wine, three who consumed only wine, and two who intoxicated themselves by absinthe.

With such an array of results before us, the most urgent step toward natural selection just now, is either for men to check increasing drunkenness or else to protect wives in their control over their own bodies.

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—A Western editor recently startled his readers with the question, "Does one woman in fifty fill the lower half of her lungs with air."



## NOTES AND COMMENTS.

## Therapeutical Notes.

## HYOSCYAMINE IN TREMOR.

Dr. Oulmont finds hyoscyamine very effective in mercurial and senile tremor. Of six patients suffering from mercurial tremor one was cured and two improved.

## SULPHATE OF ZINC IN NEURALGIA OF THE TESTIS.

Dr. Lazarus states that chronic dyspepsia, and also long abstinence from sexual intercourse, in consequence of debility of the virile powers, may give rise to neuralgia of the testis. He has had remarkable success, in many obstinate cases, by the internal administration of sulphate of zinc three times a day. He has also injected hypodermically behind the scrotum a solution of the same salt with success.

## CHLORATE OF POTASH IN CANCER.

Dr. Burow, of Berlin, has been trying the effect of sprinkling chlorate of potassa, either in powder or crystals, on cancerous ulcerations. Some Italian surgeons have previously tried this; also, they have employed the drug in uterine cancer in strong solutions. Burow is of opinion that the remedy causes a diminution and shrinkage of the villosities, resorption of neighboring ulcerations, diminution of the secretion, and lessening of pain. Whether a cure can result, he says, has not yet been decided.

## GALVANIZATION OF THE VAGUS IN ANGINA PECTORIS.

Dr. Huebner, in the *Archiv für Klinische Medizin*, December, 1873, maintains that angina pectoris is a pure neurosis, and has had excellent results from galvanization of the vagus with a weak current, the attacks ceasing instantly.

## NEW TREATMENT OF CYANOSIS.

Cyanosis, according to Dr. Foster, of Dublin, can be treated "with surprising success," by peroxide of hydrogen, the cyanotic appearance rapidly vanishing and the temperature rising.

## VEHICLE FOR HYPODERMIC INJECTIONS.

Dr. Luton recommends laurel water, *aqua laurocerasi*, as the best vehicle for the hypodermic injection of morphia and atropia. It increases their action, preserves them well, lessens the pain of the operation, and has no unpleasant effects.

## ERYSIPELAS.

Dr. Kaczorowski recommends erysipelatous inflammation to be painted every three hours with

R. Carbolic acid, 1 part.  
Oil of turpentine, 10 parts. M.

and the surrounding healthy parts to be rubbed with it; then the whole covered with solution of acetate of lead, in compresses, and cold water dressing. At first the appearances of the parts are aggravated, but in twenty-four or forty-eight hours the epidermis dries up and heals. Internally he prescribes lemonade or chlorate of potash solution.

## The Question of Alcoholic Drinks.

The controversy as to the effect of alcoholic beverages shows no signs of settlement. The ardor in testing the question by personal experiment, so wide-spread in the community, though highly creditable to its devotion to science, has as yet decided nothing. The opinions of Dr. Haeck, of Brussels, a recent student of the question, are these:—

Chronic diseases, noticed in so great a number of habitual consumers of alcoholic drinks, have not originated from the normal stimulant contained in these drinks; these diseases arise from the irritant and depressing action produced progressively by the hurtful elements so characteristic of imperfect beverages; drunkenness is one of these diseases. Hence all wines and beers ought, according to this author, after undergoing the alcoholic fermentation, to be freed from the hurtful elements contained in their early state.

According to Dr. Haeck, this gives the clue to the debate so long continued between the partisans and enemies of alcoholic drinks. The former, or consumers, cannot and will not see in alcoholic drinks any effects but beneficial effects, without wishing to recognize the injurious ones. The others, or adversaries, will not and cannot see in alcoholic drinks aught but their injurious effects, and do not wish to recognize their good effects.

## The Effects of Tea.

The effects of tea on the human system are, first, stimulant and then narcotic, according to the strength of the beverage. In moderation tea is an excellent diluent; it promotes digestion, and stimulates the renal

glands. The constant use of tea, however, in large quantities, especially by persons living on a poor vegetable diet, is not favorable to physical strength or nervous energy; and to persons engaged in sedentary employments, and imperfectly alimented, the frequent imbibing of tannin (for tea contains about 40 per cent.), has a decided and manifest pernicious effect. How far the excessive use of strong tea in China, by alternately elevating and depressing the nervous system, may have led to the craving desire for opium as a counter-stimulant, is deserving of consideration.

Dr. Adam Smith, in a paper read a few years ago before the Society of Arts, recommends the use of tea in the following cases: After a full meal, when the system is oppressed; for the corpulent and the old; for hot climates, and especially for those who, living there, eat freely, or drink milk or alcohol; in cases of suspended animation; for soldiers who, in time of peace, take too much food in relation to the waste proceeding in the body; and for soldiers and others marching in hot climates.

#### A Plea for Horse-Steaks.

Dr. Ducroix, the genial editor of *L'Abeille Medicale*, says, in a recent issue:—

"Subsequent to a discussion I lately had on hippophagy with some Americans and English, it was decided that a dinner of horse-flesh should take place at my house on Sunday, November 23d. This is the *menu potage*, of horse-flesh; *Bouilli* of horse, sausage of horse, *cheval a la mode*, stewed horse-tongue, potatoes fried in horse fat, roast horse, *salade a l'huile de cheval*, potato fritters *a la grasse de cheval*. No fish and no poultry.

"Among the guests were several English and American ladies, who, being quite edified now by their own experience, intend to contribute, as my friends, Dr. Bowditch, of Boston, and Mr. S. A. Bicknell, of London, have already done, toward the propagation in their own country of a healthy, economical, and very nourishing article of food. I am very anxious that their example should be followed by their fellow-countrymen. Is it not sad to waste such large quantities of food, when so many poor and so many laborers are deprived of the necessities of life. We appeal to the generous feelings of the English and United States Press to

overcome the prejudice that exists against this new food."

#### Hallucinations and Illusions.

A very interesting discussion on these matters took place at a late meeting of the British Medico-Psychological Association. Dr. Wilks distinguishes between these terms as subjective and objective. For example, if in an amputated leg the nerve in any part is irritated, and the patient becomes conscious of his toes being touched, this feeling is not subjective, but would be if the sensorium were impressed with such an idea when no irritation of the nerve had been induced. If one could draw a distinct line between the nerve which enters a gray centre and the centre itself, that line would mark the division between the objective and subjective sensation, according as the gray centre was impressed through the nerve or independently of it. It is related of Goethe, who was the first to propound the opinion that all the parts of the flower, its sepals, petals, etc., were modified leaves, that he could, by an effort of will, produce a vision of the flower undergoing this development.

#### Camphorein.

During the cholera epidemic in Vienna the doctors of the various cholera hospitals used, "with great success," a new remedy called "Camphorein." It is prepared simply by the induction of chlorine gas into pure turpentine oil until saturated; it gives a thick heavy oily fluid of brown color, with a strong smell of chlorine. It must be freed from muriatic acid, which may be done by washing with water. The remedy is applied by placing a portion into a flat vessel and holding it to the patient to inhale. This indicates that oil of turpentine is the best absorbent of chlorine gas, and therefore can be employed with advantage in operations and other cases where chlorine is evaporated in large quantities. Inasmuch as the mortality from cholera at Vienna was 55 per cent. of the cases, such "great success" is rather alarming.

#### A Learned Critic.

The London *Lancet*, of November 29th, takes the following remarkable notice of the last volume of the *Transactions of the State Medical Society of Pennsylvania*,

which, as usual, has appended the Code of Ethics:—

"The Medical Society of the State of Pennsylvania have issued a voluminous code of medical ethics, for the guidance of the profession in the far west. The duties of physicians to their patients, and the obligations of the latter to their physicians, are set forth in a beautiful and Utopian manner, that would have charmed the venerable old Quaker who founded the State."

#### A Mercantile View of Drugs.

The *Chemist and Druggist* says that:—

"Dr. Cook read a paper before the Liverpool Chemists' Association, sharply criticising the practice of some chemists of buying other than the best drugs or chemicals. He urged the formation of a sort of solemn league and covenant among honorable chemists, who would bind themselves to supply nothing but medicines of the highest degree of purity. The Liverpool chemists condemned Dr. Cook's proposal as Utopian." Business is business with these gentlemen, evidently.

#### The Tarantula Poison.

Professor Laycock doubts the stories of the tarantula bite causing the victim to dance. He rather thinks that the exciting cause of the rhythmical chorea is the imagination; suggestion and imitation are really the conditions under which the dance arises. The tune to which they dance, named the Tarantella, is a popular air; and in cases of rhythmical chorea in this country, it has been found that the patients danced to a popular air. In these cases the dancing movements depended on the re-excitation of the record of the air.

#### The Operation of Trepanning.

The Hon. E. G. Squier believed he had found ancient Ynca skulls bearing marks of trepanning. But this is exceeded by the assertion of the Irish historian, O'Halloran, who states that 1900 years ago Feighnin Feathig trepanned Connor, King of Ulster; and he quotes the good surgical advice which that monarch got, but disregarded. O'Halloran was a prominent surgeon, and, no doubt, had what he thought good authority for his statement.

## CORRESPONDENCE.

### [Psychological Phenomena.]

EDS. MED. AND SURG. REPORTER:—

*Ipsæ animus nescit, qualis sit animus*, is a singular paradox. The questions relating to the nature of mind, recently touched upon in your journal, lead me to contribute a few facts of my own observation, and to risk a few deductions from them.

From a number of cases under mesmeric influence, seen at different times and in different places in this region, two or three will be given. These cases are selected because they were in a high degree susceptible, and the demonstrations were known to be without possibility of collusion.

No. 1, male, age 21. Standing in front of the operator, the latter placing his right hand over the back of the neck, and with the left hand grasping the right elbow, with the fingers placed over the ulnar nerve, in the notch behind the internal condyle of the humerus, and looking intently into his eyes for several minutes, then authoritatively exclaiming "you cannot move," this man, though wide awake in all his senses, is now so perverted in perception, memory and judgment, that he can only do what he is told. Can neither sit down nor rise from a chair without permission, and a cane becomes a serpent, an apple, or a toy, as the operator may dictate.

No. 2, female, age 19. Seated in a chair beside the operator, he taking her hands in his, intently fixing his eyes upon hers, in six minutes her eyes are closed as in sleep. Then raising his hands and making a few passes from the forehead down the arms, and the process is complete. This subject now remains in what seems a cataleptic sleep for an indefinite period. The face and hands pale, cold and moist, respiration and circulation languid; and only able to speak in a subdued tone when commanded by the operator. This lady could, in nearly every case, name objects correctly, such as an apple, a knife, or a book, being placed in the operator's right hand, he standing behind her, with his left hand on her head.

No. 3, girl, age 14. In this psychological slumber, she could be induced to describe articles, objects and places she had never seen, and with a degree of accuracy that was truly marvelous. Although she could do this only when the facts were distinct in the operator's mind, he leading by questions.

Nos. 2 and 3 differ from No. 1, the latter being clearly a case of psychological insomnia. By a few reverse passes of the hands and an earnest tone of the operator's voice, Nos. 2 and 3 were always immediately restored.

From the above and many less characteristic cases some conclusions have been formed.

First, that this psychological vassalage is produced by a determined and persistent mental force of one party exerted over a

second, yielding a willing mental acquiescence.

*Second*, that each mental element has its wave and rhythm, and that the operator being the superior force, a harmony is effected, and the less is so absorbed and merged in the greater, that the latter controls sometimes entirely the responsive power of the subject, or even a large circle of subjects, as a spiritual circle.

*Third*, that when this harmony is once effected the influence may be exerted a considerable distance from, and upon the subject; showing that mental elements have a radius of action far beyond the periphery of the body.

*Fourth*, this condition is one of sedation, and in all cases, so far as seen, represented as pleasurable; persons susceptible always becoming more so by repetition; and further, being often repeated, the effect is stupefying and injurious.

Some years ago a number of very respectable and otherwise well disposed persons, all, or nearly all, religionists, formed themselves into a *spiritual circle*. After a time, by sacred chants and silent waiting, taps, tippings and other manifestations occurred, as I was told, produced by disembodied spirits. One night at a late hour a messenger came to my office saying "they want you to come over to Howard's and see for yourself about the spirits." I went, and quite soon free intercourse was set up between myself and various spirits. In every instance in which my mind was clear and positive as to the circumstance in the lifetime of the individual spirit on hand, though the circle knew nothing of the party deceased, the detail as rendered by that circle was always marvelously correct. But in every other instance, where I was doubtful or ignorant of the circumstances the circle also were uncertain, and were afterwards found to be in no instance correct.

I was compelled by force of facts to credit this party, as a whole, with fair out-door common sense, and a few of them with a rather sharp business talent. But, notwithstanding, I was led to the irresistible conclusion, after all fair allowance, that spiritualism is mesmerism rehearsed and doubly forced with delusion.

Their senses were awake, but every aggressive mental element in flat abeyance, unconsciously yielding to some controlling mind within the circle when not governed by my own will.

When spiritualists have told me, in good faith, that they have seen the law of gravitation violated, the table suspended in mid air and floating about the room, and afterward deposited in its proper place, and much more of a like marvelous character, the hallucinations, to my mind, are fully explained by what has already been said.

GEORGE HILL, M. D.

Hughesville, Penna.

## NEWS AND MISCELLANY.

### The Medical University of Leipzig.

Dr. D'Espine, of Geneva, in a communication to the *Gazette Hebdomadaire*, of December 5th, gives an interesting account of "A Recent Visit to the Medical Faculty of Leipzig." Leipzig, he observes, is at the present time the great German university, Berlin only occupying the second rank as to the number of its students, and a far lower rank still with regard to its hospitals and laboratories. One of the principal causes of this preëminence, and a principal source of the greatness of the University of Leipzig, is the immense funded property which it possesses, and the intelligent disposal of its revenues, which has enabled it to construct palaces of science, and to employ as professors men of the highest merit. The Faculty of Medicine has especially benefited by this exceptional good fortune, its building constituting almost a district at the gates of the city, where we meet with physiological and chemical laboratories, a pathological institute, and an immense shed hospital. Descriptive anatomy is alone taught amidst the other faculties, at the Augusteum, in the centre of the town.

### Astounding Obstetrical Procedure.

The *National Democrat*, Peoria, Ill., in its issue of December 28th, gives the details of a case in that city which has attracted no little comment. We suppress names.

Mrs. S. was delivered of a healthy child, December 11th. The attending physician, as the placenta seemed retained, assented to a consultation. They administered chloroform; the consulting physician inserted his hand into the womb, pronounced the placenta adherent, and worked for twenty-five minutes, bringing away what he said were pieces of it. He then exclaimed there was rupture of the uterus, and withdrew. The patient died in about four hours, and a post-mortem showed a rent in the walls of the uterus, and a portion of the bowels torn away! No placental adhesions were visible.

### The Cattle Disease in Russia.

In European Russia it is stated that the average annual loss of cattle from epizootic disease is estimated at 400,000. Each animal is valued at thirty roubles, making thus a direct annual loss in money value of twelve millions roubles. There are entire districts along the routes traversed by the herds moving northward, where it is simply impossible to raise cattle, from the constant introduction of bovine plague by the cattle passing from the southern steppes. Hitherto the measures adopted to check this evil have been too disconnected and unsystematic to have any perceptible effect upon it.



**A Knock-down Argument.**

The phenomenon of life, we are well aware, offers great difficulty, and a person who has at last reached definite views on the subject may be excused for defending them vigorously. But we really cannot approve such forcible arguments as were used in a case recently before a London Police Court. The deponent swore as follows:—"Last Tuesday night, at a quarter to twelve, I was in the Black Bull public-house, drinking with Eugene M'Gann, when a controversy arose between us. I said that the seat of life was in the heart. He said that it was in the brain. M'Gann said that if I repeated my statement again he would throw me over. I repeated it, when he caught me round the neck, put his foot behind me, and threw me heavily on my back, falling on my stomach."

**Bad Effects of Tobacco.**

We have often deplored the many injurious effects on communities of tobacco using. But still another is brought to our notice by Captain Simpson, R. N., in a description of the cannibals on Isabel Island, in the Pacific Ocean. One chief had a row of twenty-five heads undergoing the process of "preserving" in front of his hut. "The great object in life among the people is to get each other's heads." Those who are entitled to speak with authority on such a subject aver that a missionary who smokes is not near so toothsome a morsel as one who does not impregnate his tissues with tobacco. Great smokers are markedly bitter, unless well hung and dried.

**A "Crownor's Quest."**

In the recent case in which a convict in the Joliet (Ill.) penitentiary died from the effects of a cold bath administered in punishment, the Coroner's jury have returned a verdict clearing all the officers of the prison from any share of blame. The jury further expressed the opinion that the officers were "humane, capable and efficient," and that they evidently thought that a convict suffering from a trifling disease of the heart was a fool to die upon such small provocation.

**A Dangerous Case.**

Entering the hospital tent one day, during the late war, that skillful operator, Surgeon Jones, met Paddy Doyle, the orderly, and asked him which he considered the most dangerous of the many cases then in hospital. "That, sir, be jabers," said Paddy, as he pointed to where, on a table, lay a case of surgical instruments.

**Scarlet Fever.**

The McKeesport, Pa., *Times* says scarlet fever is raging with much virulence in several sections of the State. Within the last few weeks quite a number of children have died, and many are now afflicted with it in the most malignant form.

**The Siamese Twins.**

The twins died, near Greensboro, N. C., on January 17th. At 6 A. M. one of the twins' sons, who slept up stairs, heard a cry of alarm, and he went to the twins' sleeping room.

Eng was found greatly excited, his brother Chang having died during the night. He grew gradually worse, remarking, I suppose I must die too. In two hours he expired.

The family physician, Dr. James Hollinsworth, after the death of the twins, desired to examine the bodies, but was not allowed.

Prof. Pancoast, of the Jefferson Medical College, requested Mayor Stokley, of this city, to telegraph to the Mayor of Greensboro, asking for an examination in the interests of science. Our readers will be made acquainted with the results hereafter.

**State Hospital for Women and Infants.**

This institution, at 1718 Filbert street, this city, is doing a good work. During eleven months since the opening of the hospital, forty patients have availed themselves of the asylum thus afforded; and eighteen are now either under its roof or registered for early admission. No loss of life has occurred among the patients; and homes have been provided, by adoption or otherwise, for most of the children born in the institution.

**The U. S. Navy.**

Surgeon General Beale, of the Navy Department, has written a letter to Senator Cragin, stating that any reduction of the appropriation for the Medical Bureau is possible "only at the expense of the sick and disabled officers and seamen. He says the Naval Hospital Fund, contributed by seamen and officers, is no longer sufficient to maintain the hospitals, and an appropriation of \$50,000 is asked to make good the deficiency.

**The National Sanitary Convention.**

This body met at Washington, Jan. 20th, and Dr. A. W. Boardman, of Boston, was elected President. The succeeding day only eleven delegates were present, but the proceedings were enlivened by Dr. Mary Walker taking part in the discussion, on the adoption of a constitution. The members, however, "pretty well indicated" that they "did not need or want her assistance."

**Small Pox Items.**

At Plattsburg, N. Y., the churches are closed and all assemblies forbidden, on account of small pox.

Chicago charges St. Louis with being afflicted with small pox to a decimating extent, all of which St. Louis stoutly denies, and promises to reciprocate in kind on the first opportunity.

One or two cases are reported by private sources in Kansas City.

## Personal.

—Dr. George A. Christian was convicted, in Washington, of having "resurrected" dead bodies for the purpose of selling them.

—Dr. Livezey, of Yardleyville, Pa., was arrested on the charge of having caused a death by selling cyanide of potassium for iodide of potassium, ordered by a physician.

—Rev. Isaac James, M D., a local Methodist preacher at Bustleton, Pa., died on Jan. 22, aged 97 years. Deceased was a practicing physician in Bustleton, and was in the Methodist ministry for over fifty years. He was the oldest local preacher in Pennsylvania, and one of the oldest, if not the oldest, in the United States.

## Transmission of Musical Talent.

The death of the celebrated Madame Parepa-Rosa, herself the granddaughter of a famous prima donna, Miss Seguin, has given rise to the observation that so far as musical genius is concerned, it does not usually extend through more than two or three generations; and in the case of the Seguins it did not extend back in any eminent degree further than to the grandfather of Parepa.

—The famous wit, Douglas Jerrold, once, at a party, noticed a doctor in sober black waltzing with a young lady in brilliant blue. "As I live!" exclaimed the wit, "there is a blue pill dancing with a black draught." On another occasion he accompanied a surgical friend to witness some operations at the Royal Free Hospital. The first operation was amputation of a leg; the second was a minor one, for the removal of piles. His companion told the wit the nature of the operation, and thought it was not worth his time to stay to observe it. "Oh!" said Jerrold, "I have seen the 'play,' and I would rather wait to see the 'after-piece.'"

—Among the newest of Boston's many institutions is the Ladies' Physiological Institute. The design of the Institute is to extend physiological information among women, and to teach them the laws of health and life. It seeks to make women intelligent helpers of the physician in the sick room, and to fit them to become wives and mothers, helpmeets for their husbands, and capable of caring for their children in sickness and in health.

—An Irish oculist having completely restored a woman's sight, related, with astonishment, that while she could thread the finest needle, she couldn't tell one letter from another. "She had the same difficulty," replied her attending physician, "before her sight was impaired, as she never went to school."

—Private letters from the Gold Coast report that great sickness prevails among the troops of Sir Garnet Wolsley, proving fatal in many cases within a few hours after its attack.

—A physician, speaking of a patient who was prostrated by illness, remarked "he can hardly recover, since his constitution is all gone." "If his constitution is all gone," said a bystander, "I do not see how he lives at all." "O," responded the ready son of Esculapius, "he lives on the by-la-wa."

—A pow-wow doctress in Nazareth, Pa., recently undertook to bleed a lady for an epileptic fit. Unfortunately she opened an artery instead of the vein, and the patient died before assistance could be obtained.

—The accident crop of the Ohio railroads during the year ending on the 30th of last June amounted to 200 killed and 398 wounded.

—A popular doctor in Chicago was presented with a silver mounted skeleton, on New Year's, by his admiring patients.

—Jacob Deboj died recently in Cambria county, Pa., aged one hundred years. He was a soldier under Napoleon Bonaparte.

## QUERIES AND REPLIES.

## Hurried Post-mortems.

*Dr. F., of New York.*—A correspondent in Rochester, N. Y., calls attention to the inefficient post-mortem in the celebrated "Bonney Case," where a lady died in a trance after long abstinence. Too frequently post-mortems are mere formalities, too hastily performed to avail anything either to science or justice.

## The Certificates of Impostors.

*Dr. J. J. G., of Ga.*—We have so often stated that the certificates and references of traveling charlatans are mere delusions, that it is hardly worth while repeating that "Dr. Johannes A. Jones," now traveling through the South, is but one of the gang, and his Philadelphia references are not worth a straw.

## OBITUARY.

## DR. JONAS P. LOINES.

Dr. Jonas P. Loines died at his residence, Mount Vernon, Westchester Co., N. Y., Dec. 15th, 1873. Dr. Loines was Vaccine Physician to the Eastern Dispensary, and also to N. Y. Quarantine Station, for fifteen years. Whilst attending this station he vaccinated upwards of 360,000 emigrants. He furnished vaccine virus from the arms of 40,000 babies to the physicians of New York and vicinity, without complaint or accident. He was universally esteemed, and, in his specialty, unrivaled. The success that attended his labors fairly entitled him to be named the Jenner of America. He possessed a remarkably clear intellect, was genial and unassuming in disposition, and in his ministrations to the destitute and sick poor of the densely populated district of which he had charge for many years, he was always kind and considerate, and punctual in the discharge of his duty, notwithstanding that he labored under grave physical disabilities.

Resolutions in respect to his memory were passed at the last stated meeting of the Medical Society of the County of New York.